	PART B - FEE(S) TRANSMITTAL							
1 8 2007		-	ee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885				2313-1450	/
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maintenance fee notifica CURRENT CORRESPONDEN 45728	F p h I S a	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name)						
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APPLICATION NO. FILING DATE		FIRST NAMED INVE		TOR				CONFIRMATION NO.
10/789,326	02/26/2004	Nicolas G. AI	DIBA	SVL920040008US1/ 3055P				
TITLE OF INVENTIO Fault Tolerant Med		nitial Load of Replica	ated Object in Live	Sy	stem			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	UE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	:	\$ 0		\$1740	12/26/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS					
SHECHTMAN, CHERYL MARIA		2163	707-204000					
1. Change of correspon CFR 1.363). Change of corre Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03 Number is required	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	nless an assignee is iden th in 37 CFR 3.11. Comp		data will appear on th	ne pa an as	tent. If an assign	307 A	WONDAF2 AAAAAAA	ocument has been filed fo 090460 10789326
Please check the approp	oriate assignee category o	r categories (will not be pr	rinted on the patent):		Individual 🛭 C	orporat	ion or other private gro	up entity Government
4a. The following fee(s) Issue Fee Publication Fee Advance Order	Bb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0460 (enclose an extra COPY of this form).							
a. Applicant clare NOTE: The Issue Fee a		itus. See 37 CFR 1.27.	d from anyone other tha				ITITY status. See 37 Clattorney or agent; or the	FR 1.27(g)(2).
Authorized Signature	Date October 5, 2007							
_	ne Kelvin M. Vivian		_ 		Registration N	o. 53.	727	
			on is required to obtain	or r				by the USPTO to process

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USP1O to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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